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CONFIRMATION NO. 4916

<b>SERIAL NUMBER</b> 10/759,099	<b>FILING OR 371(c) DATE</b> 01/20/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1637	<b>ATTORNEY DOCKET NO.</b> AFIP 03-16 01	
<b>APPLICANTS</b> Timothy J. O'Leary, Silver Spring, MD; Jeffrey T. Mason, Gaithersburg, MD;  <b>** CONTINUING DATA *****</b> <i>Nec</i>  <b>** FOREIGN APPLICATIONS *****</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Signature]</i> Initials <i>Nec</i>		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 27370					
<b>TITLE</b> Immunoliposome-nucleic acid amplification (ILNAA) assay					
<b>FILING FEE RECEIVED</b> 856	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		